

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND												
1 Date of Request: <u>5/25/05</u>		2 Serial/Patent # <u>10/086,876</u>										
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT								
	Filing			\$								
	Amendment			\$								
<input checked="" type="checkbox"/>	Extension of Time		<u>3/3/05</u>	\$ <u>1020</u>								
	Notice of Appeal/Appeal			\$								
	Petition			\$								
	Issue			\$								
	Cert of Correction/Terminal Disc.			\$								
	Maintenance			\$								
	Assignment			\$								
	Other			\$								
			7 TOTAL AMOUNT OF REFUND		\$							
			8 TO BE REFUNDED BY:									
10 REASON:			Treasury Check									
	Overpayment	<input checked="" type="checkbox"/> Credit Deposit A/C #:										
	Duplicate Payment	9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">0</td> <td style="width: 20px;">7</td> <td style="width: 20px;">--</td> <td style="width: 20px;">1</td> <td style="width: 20px;">2</td> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> </tr> </table>				0	7	--	1	2	5	0
0	7	--	1	2	5	0						
<input checked="" type="checkbox"/>	No Fee Due (Explanation):											
<u>After expiry of SSP, can't be accepted</u>												
11 REFUND REQUESTED BY: <u>Bdean</u>												
TYPED/PRINTED NAME: _____			TITLE: _____									
SIGNATURE: _____			PHONE: _____									
OFFICE: _____												
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****												
APPROVED: <u><i>[Signature]</i></u>			DATE: <u>5/26/05</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: